

Colorado Maternal and Child Health Local Action Plan (updated 2/18/2016)											
MCH Priority: Substance Misuse Among Pregnant and Postpartum Women					Planning Period (MM/YY - MM/YY):		10/1/16 - 9/30/18				
Local Agency Name:				Priority Lead			Priority Lead Email:				
Overview: Substance Misuse Among Pregnant and Postpartum Women is a 2016-2020 MCH priority in Colorado. The MCH priority profile on Substance Misuse Among Pregnant and Postpartum Women includes key information on the issue and priority effort. (See http:// TBD). This action plan describes how the [LPHA name] will address Substance Misuse Among Pregnant and Postpartum Women at the local level.											
Goal 1:		By 2020, decrease the percent of women ages 18-44 in _____ county hospitalized for a prescription drug overdose.			Data Source:	PRAMS: baseline to be determined					
Strategy 1: *Identify key partners, stakeholders, responsible parties and resources in community. *REQUIRED											
Objective A:		By September 30, 2017, increase coordination among _____ county substance abuse stakeholders, as measured by participating in an existing coalition and developing an environmental scan.			Data Source:	Intent to leverage resources and align goals (survey)	Target	12/30/15	3/30/16	6/30/16	9/30/16
Key Activities		Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group				Progress Status (c, o, b, n)				
							12/30/15	3/30/16	6/30/16	9/30/16	
1.A.1: Obtain a list of known substance abuse-related community coalitions and grantees funded by state agencies from the Violence and Injury Prevention-Mental Health Promotion (VIP-MHP) Branch (will include CTC grantees, OBH grantees, and SIM grantees).		10/16-11/16						c	n	o	b

1.A.2: Identify potential partners, organizations and businesses in your community with interest in preventing substance abuse among pregnant or breastfeeding women (a tool to do this is available through the MIT).		11/16-12/16						
1.A.3: Engage with CDPHE on technical assistance and/or shared learning focused on community engagement in support of MCH work.		10/16-12/16						
1.A.4: Prepare a written substance abuse community resource environmental scan that identifies existing community substance abuse prevention coalitions and other community partners influential in preventing and treating substance abuse. The environmental scan should also highlight partnership gaps and opportunities (a tool to do this is available through the MIT).		1/17-3/17						
1.A.5: Disseminate Substance Abuse Community Resource Environmental Scan to all partners identified in the plan.		3/17-4/17						
1.A.6: Assist existing coalition to identify new coalition members based on the Environmental Scan as needed.		4/17-5/17						
Strategy 2:	*Expand local use of pregnant/ postpartum substance abuse data. *REQUIRED							
Objective A:	By September 30, 2017, identify SMART objectives that will impact pregnant/postpartum women based on community-level data.	Data Source:	Written SMART Objectives	Target	12/30/15	3/30/16	6/30/16	9/30/16
Key Activities	Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group	Progress Status (c, o, b, n)					
			12/30/15	3/30/16	6/30/16	9/30/16		

2.A.1: Using the the tool kit available from the MIT, identify all possible substance abuse-related data sources available at the community/regional level (e.g. death, hospitalization, emergency department, PDMP, law enforcement, treatment data).	10/16-12/16					
2.A.2: Work with the prescription drug epidemiologist at CDPHE to gather all existing prescription drug data related to women of reproductive age for ____County, including PDMP data.	1/17-3/17					
2.A.3: Work with CDPHE staff to obtain marijuana data related to women of reproductive age for _____County (e.g. local BRFSS results: marijuana use (2013-2015).	1/17-3/17					
2.A.4: Collect data available from identified community level sources identified in activity 2.A.1.	3/17-6/17					
2.A.5: Create a written community data report	6/17-7/17					
2.A.6: Create a community data presentation	6/17-7/17					
2.A.7: Present community data presentation and disseminate written community data report to existing substance abuse prevention coalitions.	7/17-8/17					
2.A.8: Identify existing community substance abuse coalitions and partner to define the role of MCH and represent the needs of pregnant/postpartum women.	8/17-9/17					
2.A.9: Partner with existing community substance abuse coalitions to identify specific SMART Objectives based on the community data report and community needs that will impact pregnant/postpartum women.	8/17-9/17					
2.A.9: Explore the possibility of developing unique local level data sources, such as collecting WIC data, that may fill gaps in what is known about the target population (original data collection is optional).	8/17-9/17					

Strategy 3:	(OPTIONAL) Leverage and support community-level strategies that impact pregnant/ postpartum women
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Objective A:	By September 30, 2017, complete an action plan to achieve SMART objectives to prevent substance use among pregnant and breastfeeding women in collaboration with existing community substance abuse coalitions.	Data Source:	Written action plan	Target	12/30/15	3/30/16	6/30/16	9/30/16
Key Activities		Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group	Progress Status (c, o, b, n)				
				12/30/15	3/30/16	6/30/16	9/30/16	
3.A.1: Join existing substance abuse coalition to represent interests of the pregnant and postpartum population.		1/17-3/17						
3.A.2: Participate in identifying ways to leverage resources to achieve shared goals among coalition members.		3/17-6/17						
3.A.3: In partnership with existing community coalition, select community-level strategies that impact pregnant/postpartum women (note: this activity will likely be done in conjunction with the Communities that Care grantees with a dedicated full-time CTC coordinator--timelines may vary slightly for each community).		6/17-8/17						
3.A.4: Complete a written community-specific action plan to prevent substance use among pregnant and breastfeeding women in collaboration with existing substance abuse coalitions (note: this action plan may be the a Communities that Care Action Plan, as long as it includes outcomes to measure the impact of strategies on the pregnant and breastfeeding population).		8/17-9/17						

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Strategy 4:	(OPTIONAL) Disseminate mass reach substance abuse prevention social norming campaigns from state agencies									
Objective A:	By September 30, 2017, increase reach of social norming campaigns from state agencies in the local community		Data Source:	# of local outlets disseminating materials	Target	12/30/15	3/30/16	6/30/16	9/30/16	
Key Activities		Start and End Date (MM/YY - MM/YY)	Responsible Persons or Group		Progress Status (c, o, b, n)					
					12/30/	3/30/1	6/30/1	9/30/		
4.A.1: Disseminate Speak Now, Good to Know/Marihuana en Colorado, Take Meds Seriously materials that have been developed and will be provided by CDPHE (LPHA's will customize these activities based on their avenues of dissemination, which materials they have access to, and time according to other campaign activities happening in the community.)		10/16-9/17								
4.A.2: Promote trainings on substance abuse prevention- SBIRT/PDO/MJ - to partners.		10/16-9/17								
4.A.3: Explore ways to strengthen cross-department collaboration related to materials distribution (e.g. opportunities to disseminate substance abuse prevention materials as a part of post-partum depression work or WIC).		10/16-9/17								